PTO/SB/22 (12-04)

Approved for use through 07/31/2083. CXMB 0851-0031

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the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PÉTITION FOR EXTENSION OF TIME UNDER 37	Docket Number (Optional)						
FY 2005 (Fass pursuant to the Consolidated Agenerations Act, 2005 (H.R. 4818).)							
	<u> </u>	Filed 27 OCTOBER	2000				
Application Number 09/699,216 For Apparatus for Enabling Multiple Management	ndes of Operat						
	0403 01 Open a	Examiner GAIL KAPL	AN VERBITSKY				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified							
application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
	Fee	Small Entity Fee					
(37 CFR 1.17(a)(1))	\$120	\$60	s_60.00				
T⊮o months (37 CFR 1.17(a)(2))	\$450	\$225	\$				
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$				
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$				
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$				
Applicant claims small entity status. See 37 CFR 1.3	27.						
A check in the amount of the fee is enclosed.							
Payment by credit card. Form PTO-2038 is attached.							
The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number I have enclosed a duplicate copy of this sheet.							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
I am the 💢 applicant/inventor.							
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).							
attorney or agent of record. Reg	istration Number _		-				
attorney or agent under 37 CFR Registration number if acting under	1.34. 37 CFR 1.34						
	· ·	19 APRIL	2005				
Signature		Da	te				
PATRICK H. POTEGA		818 340-7268					
Typed or printed name	Telephone	e Number					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total of ONE forms are submitted.							

This collection of information is required by 37 CFR 1.138(a). The information is required to obtain or retain a banafit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this turn and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORWS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2)
Approved for use through 07/31/2003. OMB 0351-0032
Codemark Office: U.S. DEPARTMENT OF COMMERCE

I Inder the Penerwi	ork Reduction Act of 1995 no namons are red	uined to nesu	U.S. Patent annd to a collection	end Tredement Units of information unles	s it displays a	valid OMR control number	
	Filadina en 12/03/2004.				i Known		
A Full pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 09/6		99,216		
	TRANSMITT		Filing Date	27 00	TOBER 20	05	
	For FY 2005	- I	First Named Inv	entor PATR	ICK H. PO	TEGA	
			Examiner Name	GAIL	KAPLAN V	ERBITSKY	
Applicant cla	ims small entity status. See 37 CFR 1.2	27	Art Unit	2859			
TOTAL AMOUNT	CF PAYMENT (\$) 60.00		Atterney Docke	i No.			
	no agreement (the only all Mann ampha)						
	PAYMENT (check all that apply)						
✓ Check	Credit Card Money Order	None	Other (p	olease identify):			
Deposit Ac	count Deposit Account Number:		Deposit Ac	count Name:			
For the ab	cove-identified deposit account, the Direct	tor is here	by authorized to	: (check all that ap	opły)		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee							
	arge any additional fee(s) or underpayme	ents of fee		any overpaymen			
1 1	der 37 CFR 1.16 and 1.17 Non on this form may become public. Cred		·	• • •		visio erodit ezrd	
WARNING: Information and au	ition on this form may lescome pulsics. Crea thorization on PTO-2038.	ur cena mac	TRIVETTON SHOULD IN				
FEE CALCUL	NON						
1. BASIC FILIR	ig, search, and examination	FEES					
,,,	FILING FEES	SEAR	CH FEES	EXAMINATIO	N FEES LEnging		
Application 1	<u>Small Entity</u> <u>From (S)</u> From (S)	Fee (8)	Small Entity Fee (3)		3 (§)	Fees Paid (S)	
Utility	300 150	500	250	200 10	00		
Design	200 100	100	50	130	65		
Plant	200 100	300	150	160	80		
Reissue	300 150	500	250	600 30	00		
Provisional	200 100	0	0	0	0	, 	
2. EXCESS C	Laim Fieies				=	Small Entity	
Fee Description	<u>on</u>			•	<u>Fcə (৪)</u> 50	<u>F∞ (3)</u> 25	
Each claim	over 20 (including Reissues) endent claim over 3 (including Reiss	mec)			200	100	
	endent claims	sucs)			360	180	
Total Claims	Entro Claims Feo (3)	<u>Fee</u>	<u> </u>	2	lulitata Dag	condont Claims	
-2	20 or HP = x	_=			Fee (§)	<u>Fee Paid (3)</u>	
	mber of total claims paid for, if greater than 20. Entire Claims Fee (S)	l. Feor	<u> Paid (8)</u>				
-3	Sor HP = II	_=					
) -	mber of independent claims paid for, if greater	than 3.					
3. APPLICATION OF THE SPECIFIC	eation and drawings exceed 100 sheet	ets of pap	er (excluding	electronically fil	led sequen	ce or computer	
listings un	nder 37 CFR 1.52(e)), the application	n size fee	due is \$250 (\$125 for small e	ntity) for e	ach additional 50	
sheets or t	fraction thereof. See 35 U.S.C. 41(a	a)(1)(G) a	nd 37 CFR 1.1	l 6(s). or frection therec			
Total Shoe	<u> </u>	TOT GETTE	(round up to a	whole number)	(_ =	
4. OTHER FEE				-		Fees Paid (S)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g.,	late filing surcharge): PETITION FOR	REXTENS	ON OF TIME U	NDER 37 CFR 1.	136(a). 1 MC	00.00 HTMC	
CHONING BY							
SUBMITTED BY Signature			Registration No.		Telephone	⁸ 818-340-7268	
Signature			Attomey/Agent)		Date 19 APRIL 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the Instruction or manufactors to required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an explication. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to the 30 minutes to complete, including generating, preparing, and cubmiding the completed application form to the USPTO. Time will very depending upon the information comments on the amount of time you require to complete this form endour suggestions for returning this burder, should be sent to the Chief Information Officer, U.S. Patent and Treatement Office, U.S. Dependment of the Commence, P.O. Box 1450, Abstraction, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioners for Patents in commence, P.O. Box 1450, Abstraction, VA 22313-1450.

PATRICK H. POTEGA

Name (Print/Type)